

Amendments to the Claims:

This listing of claims will replace all prior versions, and listings, of claims in the application:

Listing of the Claims:

1. (Currently Amended) A method of performing transluminal mitral annuloplasty, comprising the steps of:

providing a catheter, having a prosthesis thereon;

inserting the catheter into the venous system;

transluminally advancing the prosthesis into the coronary sinus;

~~advancing~~ actuating a control element on the catheter to selectively advance at

least one tissue anchor from a retracted position to an extended position; and

manipulating a component of the prosthesis to cause the prosthesis to exert force on the mitral valve annulus.

2. (Original) A method as in claim 1, further comprising the step of percutaneously accessing the venous system prior to the transluminally advancing step.

3. (Original) A method as in claim 2, wherein the accessing step is accomplished by accessing one of the internal jugular, subclavian and femoral veins.

4. (Original) A method as in claim 1, further comprising the steps of first measuring the coronary sinus and then selecting an appropriately sized prosthesis prior to the inserting step.

5. (Original) A method as in claim 1, further comprising the step of measuring hemodynamic function following the manipulating a component of the prosthesis step.

6. (Original) A method as in claim 5, further comprising the step of determining an ongoing drug therapy taking into account the post implantation hemodynamic function.

7. (Original) A method as in claim 1, wherein the advancing at least one tissue anchor step comprises advancing the anchor from an axial orientation to an inclined orientation.

8. (Original) A method as in claim 7, wherein the tissue anchor has a proximal end for piercing tissue and a distal point of attachment to the prosthesis, and the advancing at least one tissue anchor step comprises rotating the anchor about the point of attachment.

9. (Original) A method as in claim 1, comprising advancing at least two tissue anchors to an extended position.
10. (Original) A method as in claim 8, comprising advancing at least two tissue anchors to an extended position.
11. (Original) A method as in claim 1, wherein the manipulating a component of the prosthesis step causes the prosthesis to transform into a curved configuration having a first side facing towards the mitral valve annulus and a second side facing away from the mitral valve annulus.
12. (Original) A method as in claim 11, additionally comprising the step of advancing at least two tissue anchors in the direction of the mitral valve annulus.
13. (Original) A method as in claim 12, wherein a first tissue anchor inclines outwardly from the prosthesis in a distal direction and a second tissue anchor inclines outwardly from the prosthesis in a proximal direction.
14. (Original) A method as in claim 1, wherein the manipulating step comprises axially moving a forming element with respect to the prosthesis, to bend the prosthesis.
15. (Original) A method as in claim 1, further comprising the step of locking the prosthesis to retain a force on the annulus following the manipulating step.
16. (Withdrawn) A method as in claim 15, wherein the locking step comprises moving an engagement surface from a disengaged configuration to an engaged configuration.
17. (Original) A method as in claim 15, wherein the locking step comprises providing an interference fit.
18. (Withdrawn) A method as in claim 15, wherein the locking step is accomplished with a threaded engagement.
19. (Original) A method as in claim 5, wherein the step of monitoring hemodynamic function is accomplished using transesophageal echo cardiography.
20. (Withdrawn) A method as in claim 5, wherein the step of monitoring hemodynamic function is accomplished using surface echo cardiographic imaging.
21. (Withdrawn) A method as in claim 5, wherein the step of monitoring hemodynamic function is accomplished using intracardiac echo cardiographic imaging.

22. (Withdrawn) A method as in claim 5, wherein the step of monitoring hemodynamic function is accomplished using fluoroscopy with radiocontrast media.

23. (Withdrawn) A method as in claim 5, wherein the step of monitoring hemodynamic function is accomplished using left atrial or pulmonary capillary wedge pressure measurements.

24-54. (Canceled)